

**ISSUE SLIP STAPLE ARFA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.G		8/5/99
O.I.P.E. CLASSIFIER		59	8/10
FORMALITY REVIEW	g	71531	8-19-99 110 99

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
- (Through numeral) ...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Final	Original	7/22/01	7/22/01	7/22/01	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet(s) ~~not~~

If more than 150 claims or 10 actions  
staple additional sheet(s).

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